

## PART B - FEE(S) TRANSMITTAL

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23935 7590 05/13/2005

**KOPPEL, JACOBS, PATRICK & HEYBL**  
**555 ST. CHARLES DRIVE**  
**SUITE 107**  
**THOUSAND OAKS, CA 91360**

06/02/2005 FFANAI3 00000108 10736110

01 FC:1501 1400.00 OP  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Eleanor Nakada	(Depositor's name)
<i>E. Nakada</i>	(Signature)
5-26-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/736,110	12/12/2003	Nathan R. Carter	A8SJ2357US	3653

TITLE OF INVENTION: COMMON MODE LINEARIZED INPUT STAGE AND AMPLIFIER TOPOLOGY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	08/15/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MOTTOLA, STEVEN J	2817	330-252000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Koppel, Jacobs,  
1. Patrick & Heybl  
2.  
3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

Analog Devices, Inc.

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Norwood, MA 02062

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

## 4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

## 4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 11-1580 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Steven C. Patrick*

Date 5-26-05

Typed or printed name Steven C. Patrick

Registration No. 40,341

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